

FIG. 1

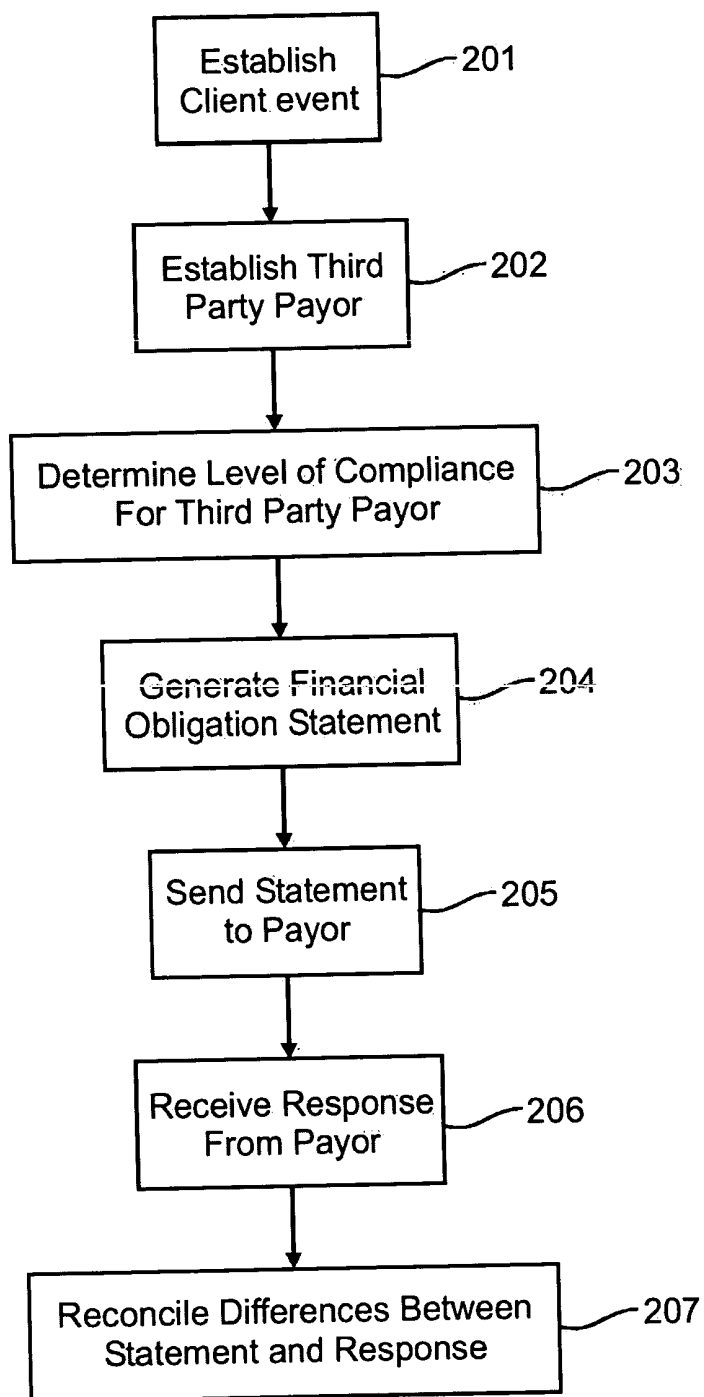


FIG. 2

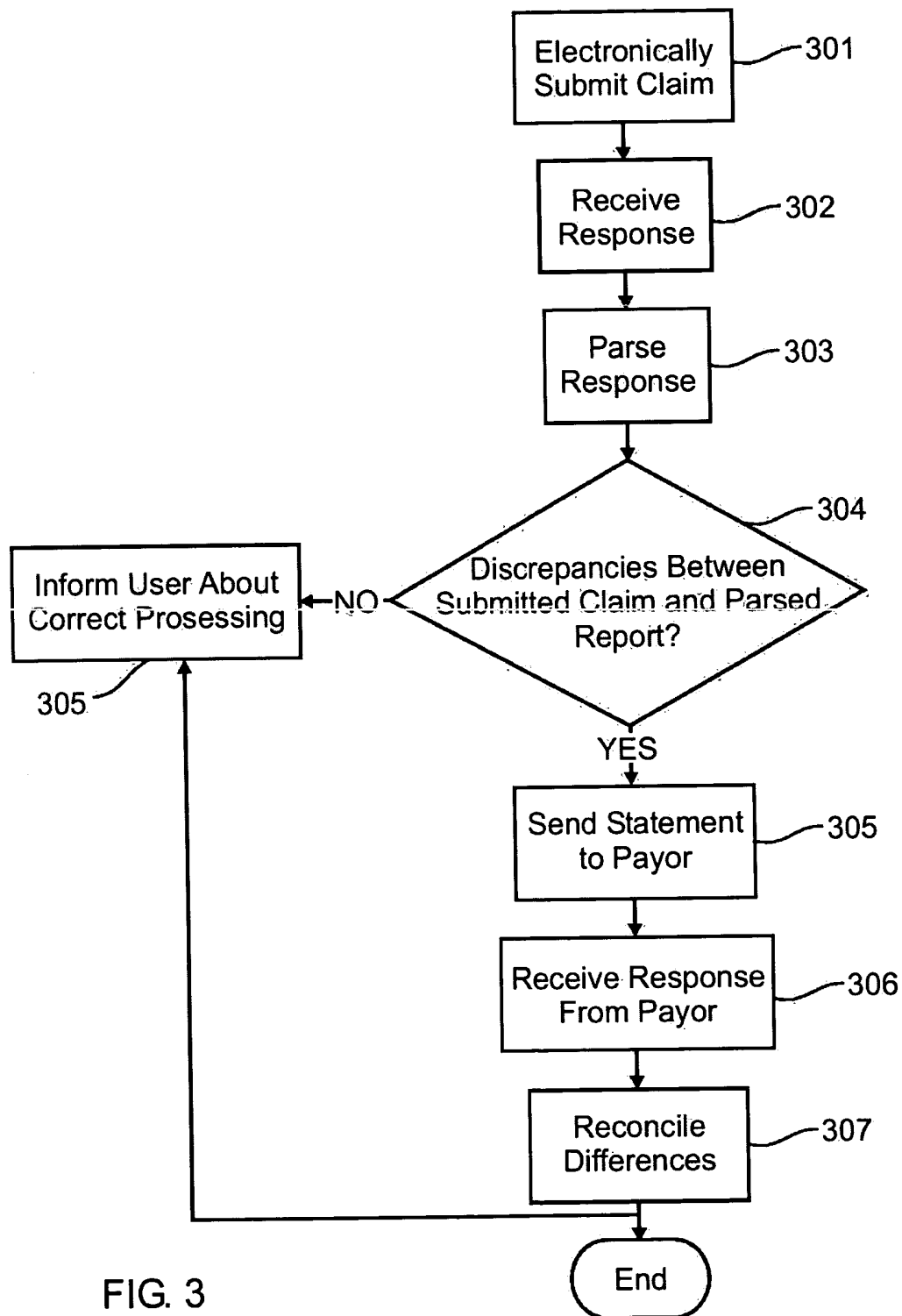


FIG. 3

Level 10 Ophthalmology (1.0.2.28) - [Find Patient]

Admin Billing Reference Schedule Password Logout Exit Window

Account No.: Last Name: First Name: SS No.:
Phone (ex.: 805224444): Reference No.:

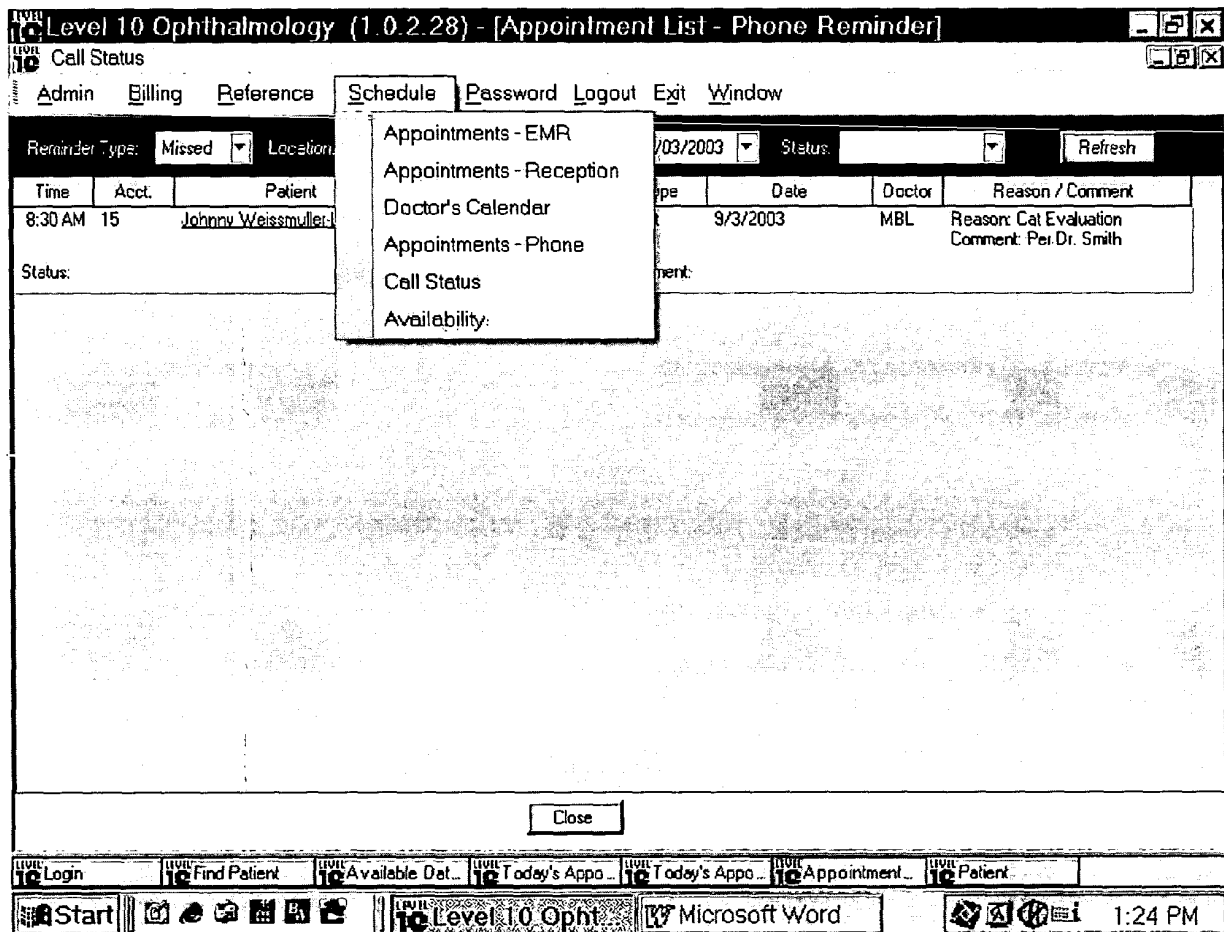
Find Clear Cancel

Add New

Account	SS No.	Name	DOB	Phone
15	555-66-7777	Weissmuller-Lawless, Johnny	4/23/1950	(111)222 3333

LEVEL 10 Login LEVEL 10 Find Patient LEVEL 10 Patient

Start Level 10 Opht 1:06 PM



Level 10 Ophthalmology (1.0.2.28) - [Appointments by Doctor]

Admin Billing Reference Schedule Password Logout Exit Window

Refresh Print

Location: **SLO** Doctor: **Michael B. Limberg** Date: **09/03/2003**

Time	Location	Acct. No.	Name	DOB	Reason	Comment
8:30 AM	SLO	15	Johnny Weissmuller-Lawless	04/23/1950	Cat Evaluation	Per Dr. Smith

Start | Find Patient | Available D... | Today's Ap... | Today's Ap... | Appointme... | Today's Ap... | Patient | Appointme...

Level 10 Opht Microsoft Word - ... 1:21 PM

Level 10 Ophthalmology (1.0.2.28) - [Patient]

Admin Billing Reference Schedule Password Logout Exit Window

Location: SLO First: Johnny Last: Weissmüller-Lawless MI: Pronunciation/Nick Name: Suffix:
 Account No: 15 Co-Pay: \$10 Status: Financial Class: Age: 53

Personal Notes Insurance Appointments EMR Approvals Recalls Payments Charges Ledger

Reference No.: 2233 Marital Status: Married PCP: Sex: M Salutation: Mr.
 Date of Birth: 04/23/1950 SS No.: 555-66-7777 Referral Insurance Company Classification:
 Address: Street: 197 Falkfoot lane City: San Luis Obispo State: CA Zip: 93401
 Phone: Home: (111)222-3333 Cell: (805)999-9999
 Work: (805)222-3333 Ext.:
 Employment: Occupation: Highway Patrol Officer Employer: California Highway Patrol
 Emergency Contact: Name: Sue Law Phone: (805)541-1342 Ext.:
 Phone 2: (805)541-1342 Ext. 2: Relationship: Mother
 Account Responsible: Same as patient Salutation: Mr. Relationship: Self
 First: Johnny Last: Weissmüller-Lawless MI: Home Phone: (111)222-3333 Cell: (805)999-9999
 Street: 197 Falkfoot lane Work Phone: (805)222-3333 Ext.:
 City: San Luis Obispo State: CA Zip: 93401 email: jaw@email.com

Last updated by: JSG Save Cancel on: 7/24/2003 8:19 AM

Level 10 Login Level 10 Find Patient Level 10 Patient Level 10 Level 10 Oph Microsoft Word 1:07 PM

Level 10 Ophthalmology (1.0.2.28) - [Patient]

Admin

Billing

Reference

Schedule

Password

Logout

Exit

Window

Location: SLO

First: Johnny

Last: Weissmuller-Lawless

MI:

Pronunciation/
Nick Name:

Suffix:

Account No: 15

Co-Pay: \$10

Status:

Financial Class:

Age: 53

Personal

Notes

Insurance

Appointments

EMR

Approvals

Recalls

Payments

Charges

Ledger

Name	Rank	Phone	Contract Type	Active	Effect From	To	Auth	%
<New Insurance>								
AARP-UnitedHealth	1	(800)523 5800		Y			Y	

Insurance Company

Name:

Street:

City:

State:

Zip:

Attention:

Carrier Type:

Fin. Class:

Medi-Gap Code:

EMC Dest. Code:

NEIC Code:

Claim Form:

Rank: 1

☒ Active:

Co-Pay: \$

Phone:

Percentage:

Policy:

Same as patient

First:

Last Name:

MI:

ID:

Sex:

Street:

Relationship to insured:

Date of Birth:

City:

Group Name:

Group No:

State:

Zip:

Phone:

Effective from:

to:

Employer:

Notes:

☐ Authorization required

Hold until paid for:

Last updated by: JSG

Save

Cancel

on: 7/24/2003 8:19 AM

Login

Find Patient

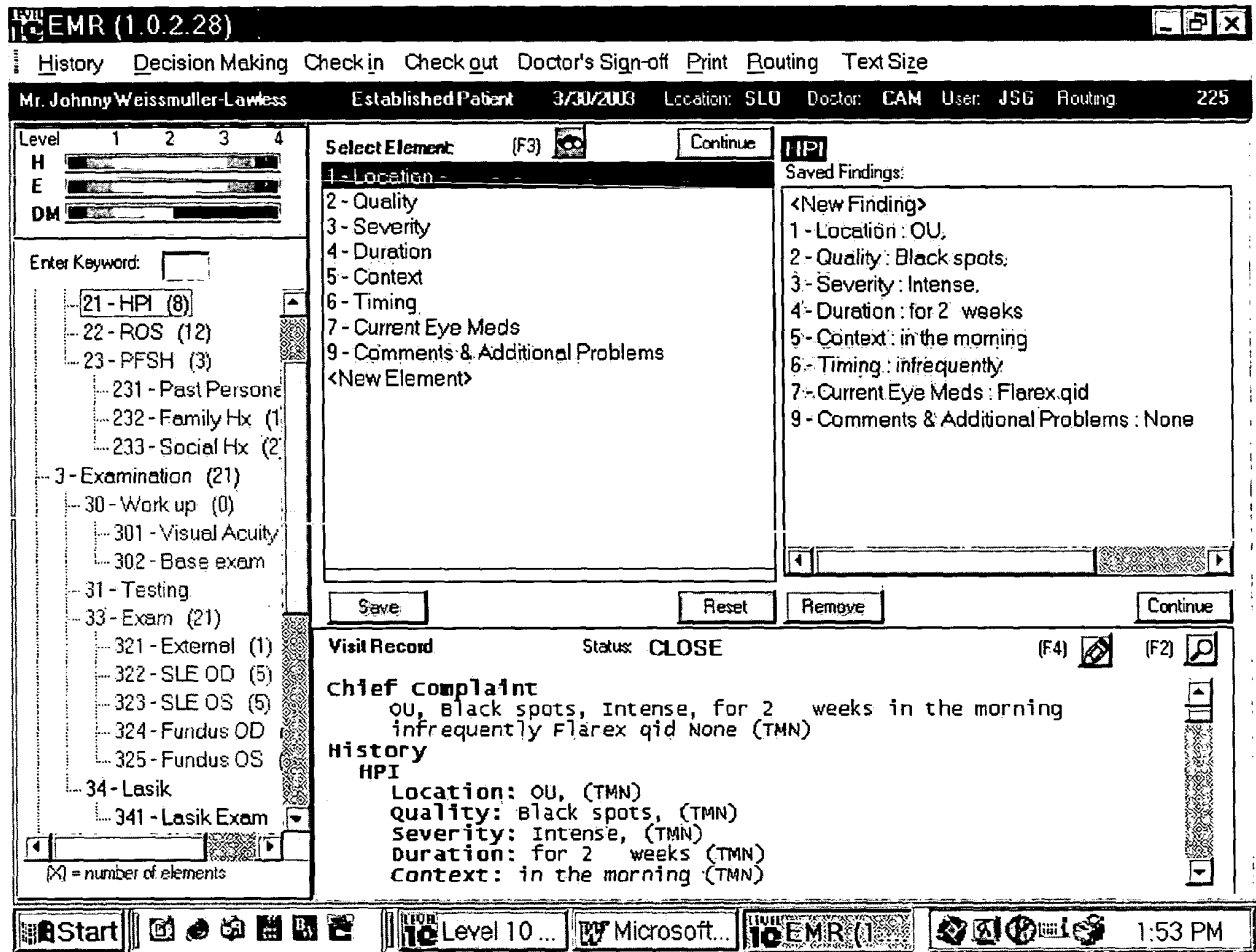
Patient

Start

Level 10 Opht

Microsoft Word

1:08 PM



EMR (1.0.2.29)

History Decision Making Check in Check out Doctor's Sign-off Print Routing Text Size

Mr. Johnny Weissmuller-Lawless Established Patient 5/30/2003 Location: SLD Doctor: MBL User: JSG Routing: 646

Level	1	2	3	4
H				
E				
DM				

Enter Keyword:

- 21 - HPI (4)
- 22 - ROS (12)
- 23 - PFSH (3)
 - 231 - Past Personal Hx
 - 232 - Family Hx (1)
 - 233 - Social Hx (2)
- 3 - Examination (21)
 - 30 - Work up (0)
 - 301 - Visual Acuity
 - 302 - Base exam
 - 31 - Testing
 - 33 - Exam (21)
 - 321 - External (1)
 - 322 - SLE OD (5)
 - 323 - SLE OS (5)
 - 324 - Fundus OD
 - 325 - Fundus OS
 - 34 - Lasik
 - 341 - Lasik Exam

(X) = number of elements

Select Element: (F3) Continue

1 - Allergies & Reactions

2 - Current meds

Current meds

Select Findings:

Etrafon - Etrafon

Feldene - Feldene

Enter Findings: (F2)

Feldene

Save Reset Remove Continue

Past Personal Hx

Saved Findings:

<New Finding>

1 - Allergies & Reactions: Penicillin

2 - Current meds: Feldene

3 - Illnesses/Injuries: Good general health

4 - Operations/Admissions: Knee replaced R side

5 - Current Eye Meds: Flarex

6 - Past Eye Surgeries: LASIK ou 1998

Visit Record Status: CLOSE (F4) (F2)

PFSH

Past Personal Hx

Allergies & Reactions: Penicillin, (TMN)

Current meds: Feldene, (TMN)

Illnesses/Injuries: Good general health (TMN)

Operations/Admissions: Knee replaced R side 1999 (TMN)

Current Eye Meds: Flarex (TMN)

Past Eye Surgeries: LASIK ou 1998 (TMN)

Family Hx

Mother: Glaucoma, (TMN)

Start Business... Level 10 O... EMR (1.0.2.29) 10:13 AM

Doctor's SignOff

Mr. Johnny Weissmuller-Lawless | Established Patient | 6/13/2003 | Location: SLO | Doctor: MBL | User: JSG | Routing: 823

Decision Making | Billing

OPEN ☐ Post-O ☐ Select E& 99211 ☐ Eye Code ☐ Modifier

Claim Stat New ☐ Calculat Select E& ☐ Intermediate 9201 ☐ Complete 9201 ☒ E & M

☐ Histractiv

Modifier	Description
<input type="checkbox"/> -24 - Unrelated Exam/Past-o	
<input type="checkbox"/> -25 - Same day eval/proced	
<input type="checkbox"/> -57 - Decision for surgery	

Procedures

Bill	CPT	Description	ICD	M1	M2
<input checked="" type="checkbox"/>	9201	Intermediate	362.01		

[Link to](#)

Diagnoses

Bill	Prima	ICD	Description
<input checked="" type="checkbox"/>		362.01	GLAUCOMA SUSPECT

Save | SignOff | ReOpen | Cancel

Start | Level ... | Micros... | EMR (... | Doct... | 1:57 PM

Level 10 Ophthalmology (1.0.2.28) - [Patient]

Admin

Billing

Reference

Schedule

Password

Logout

Exit

Window

Location: SLO

First: Johnny

Last: Weissmuller-Lawless

MI:

Pronunciation/
Nick Name:

Suffix:

Account No: 15

Co-Pay: \$10

Status:

Financial Class:

Age: 53

Personal

Notes

Insurance

Appointments

EMR

Approvals

Recalls

Payments

Charges

Ledger

View: Medicare

From: 08/01/2003

To: 08/01/2003

Show

Clear

Patient Notes:

Tot. Balance: \$579.43

Ins. Bal 1: \$74.43

2:

3:

Pt. Resp. \$505.00

	Post Date	Routing	Visit Date	Notes	Doctor	Location	Charge	Adjustment	Credit	Balance
⊞	02/22/2003	433	02/21/2003		ABC	SLO	150.00	31.96	38.61	79.43
⊞	10/21/2002					SLO	4000.00		3500.00	500.00

Last updated by: JSG

Save

Cancel

on: 7/24/2003 8:19 AM

Level 10 Login

Level 10 Find Patient

Level 10 Available D...

Level 10 Today's Ap...

Level 10 Today's Ap...

Level 10 Appointme...

Level 10 Patient

Level 10 Reconciliat...

Level 10 Review Cla...

Start

Level 10 Oph...

Microsoft Word - ...

1:48 PM

Insurance Company

Name: Blue Cross

Street: P. O. Box 60007

City: Los Angeles

State: CA

Zip: 90060-0007

Phone:

Fax:

Attention: Claims Department

Eligibility Phone:

Ext:

Claims Phone:

Ext:

Claim Form:

Medigap Code: 00346

NEIC Code:

Carrier Type:

EMC Dest. Code:

EDI Type: C1

Financial Class: PPO

EDI Claim Filing Indicator: BL

EDI Receiver ID:

Web Site: bluecrossca.com

Last update: 3/19/2003

By: JSG

Doctor's ID

Location:

Arroyo Grande

Cambria

Halcyon

Kinn City

San Luis Obispo

Santa Maria

Templeton

Doctor	Pin	Group No	Using ID Of
Michael B. Limberg			
Michael B. Limberg			
Michael B. Limberg			
Michael B. Limberg			
Michael B. Limberg			
Michael B. Limberg			
Michael B. Limberg			
Michael B. Limberg			
Michael B. Limberg			

Save

Remove

Cancel

1/2003

Refresh

Rank

Charge

Phone

Carrier Type

8004226089

5597341221

8005647475

8003225709

8003456784

8006620876

8007272227

8002928868

8002322345

8006276655

3126537330

8003622218

8004320216

8002620820

8006428516

8004320750

8009424254

8009521976

8005727331

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FIG. 4k

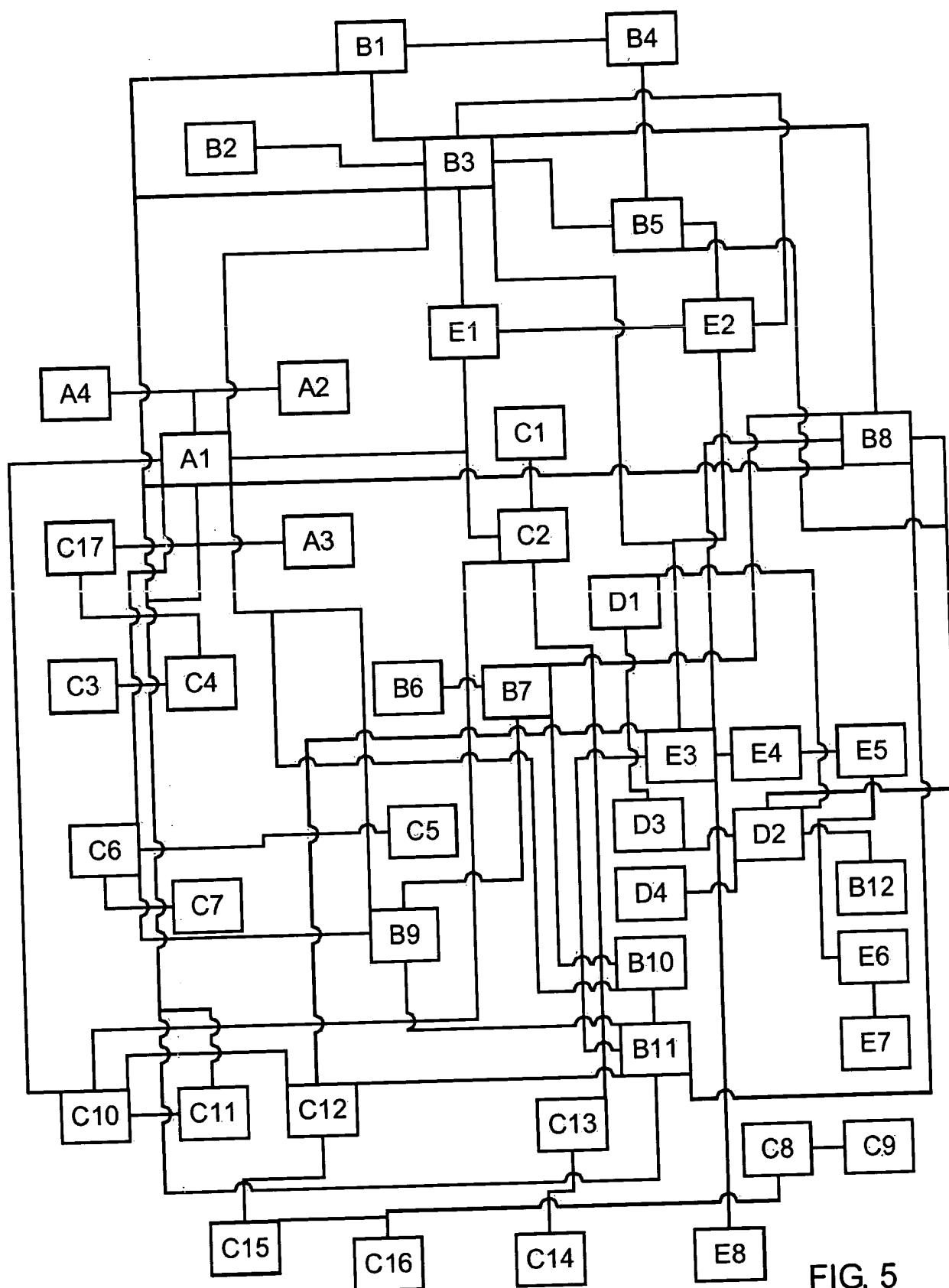


FIG. 5

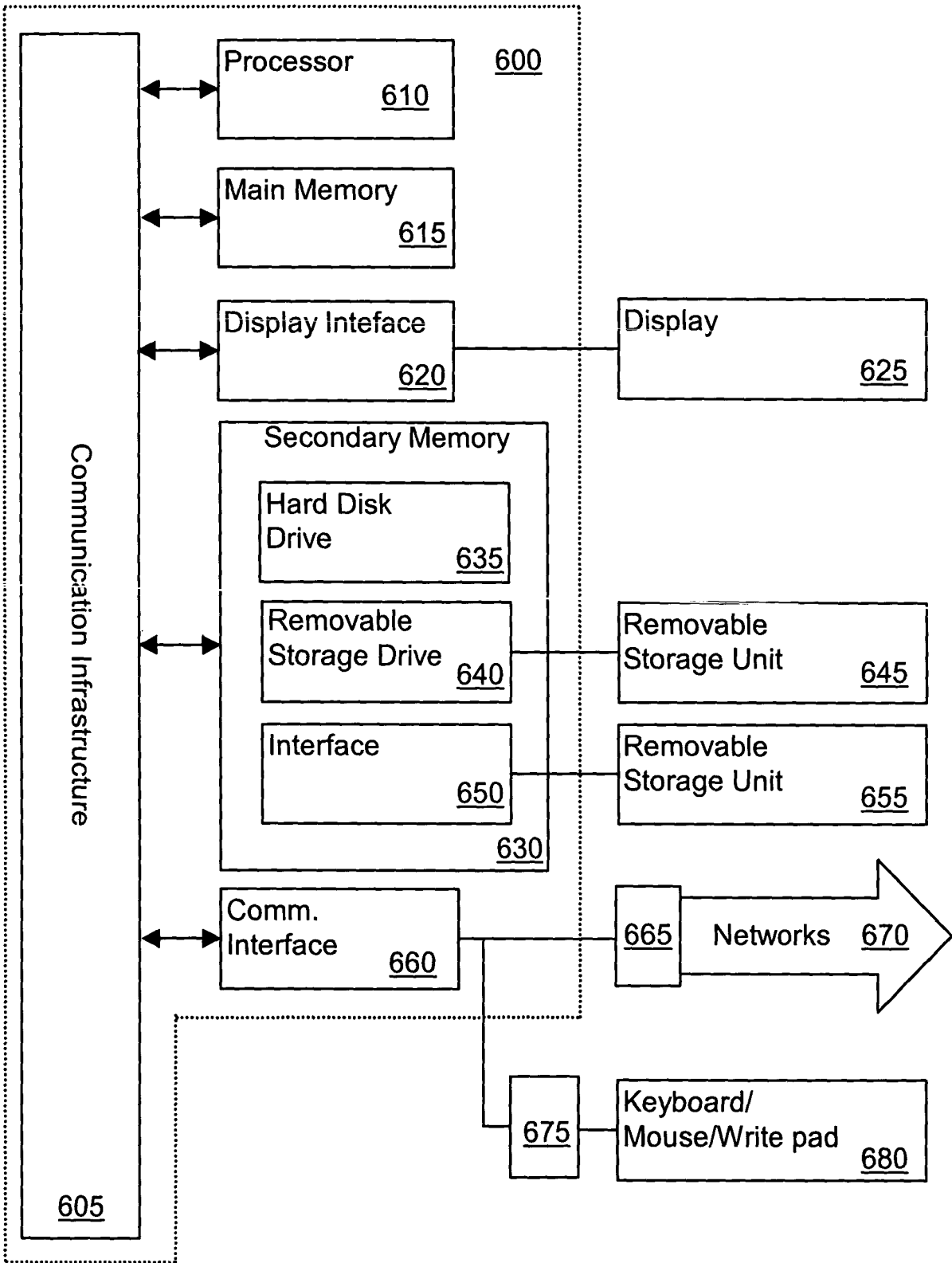


FIG. 6